UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



MR APPROVAL. ber: 3235-0076 fay 31, 2002

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RECD S.E.C.

2002

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR 21-38877

SEC USE ONLY						
Prefix		Serial				
DAT	E RECEI	VED				

11	UNIFORM LIMITED OFFERING E	EXEMPTION	
: 8	:086		
Name of Offering (check i	f this is an amendment and name has changed, and indicat	e change.)	
Series C Preferred Stock of			
	that apply): 🗌 Rule 504 🔲 Rule 505 🖾 Rule 506 🔲 S	ection 4(6) ULOE	
Type of Filing: New Filing	Amendment		
	A. BASIC IDENTIFIC	CATION DATA	
1. Enter the information requ	ested about the issuer		
Name of Issuer (check if t	his is an amendment and name has changed, and indicate of	change.)	
ProfitLogic, Inc.			
Address of Executive Offices		Telephone Number (including Ar	rea Code)
11 Cambridge Street, Camb		(617) 218-1900	
	Operations (Number and Street, City, State, Zip Code)	Telephone Number (including Ar	rea Code)
(if different from Executive C			
Brief Description of Business			
Providing profit optimization	on solutions to other businesses.		nno.
Type of Business Organizatio	n		PROCESSED
corporation	☐limited partnership, already formed		
ZZ corporation	Unimited partitership, arready formed	other (please specify):	7 1441 2 0 0000
☐ business trust	☐limited partnership, to be formed		JAN 2 9 2002
Actual or Estimated Date of I	ncorporation or Organization: Month Year 0 8 0 0		THOMSON FINANCIAL
Jurisdiction of Incorporation	or Organization: (Enter two-letter U.S. Postal Service abb	reviation for State:	LINANCIAL
	CN for Canada: FN for other fo		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner		□ Director	☐ General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Levy, Michael							
Business or Residence Addre	,		Code)				
11 Cambridge Street, Cam					- <u>-</u>		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Friend, Scott		10: 0: 0: 0:					
Business or Residence Addre 11 Cambridge Street, Cam			Code)				
				Δ D: .			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Tobin, Scott Business or Residence Addre	ess (Number an	d Street City State 7in	Code)				
20 William Street, Suite 20			Code)				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first,		Delicticiai Owner	EN EXCEUTIVE Officer	Director	General and/or Managing Larmer		
Gonnerman, Michael	ii iiidividuai)						
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)				
11 Cambridge Street, Cam			,				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Bain Capital Fund VII, LL	<u>.C</u>						
Business or Residence Addre			Code)				
Two Copley Place, 7th Floo	r, Boston, MA	02116					
Check Box(es) that Apply:	Promoter	🛮 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Athena Venture Fund L.P.							
Business or Residence Addr			Code)				
310 University Avenue, #20							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,							
General Catalyst Group, L							
Business or Residence Addr The Prudential Tower, 800							
The Prudential Tower, 800							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Battery Ventures VI, L.P.			-,-,-,-				
Business or Residence Addr			Code)				
20 William Street, Suite 20					[] ()		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
J.P. Morgan Partners (BHCA), L.P. Business or Residence Address (Number and Street, City, State, Zip Code)							
1221 Avenue of the Americas, New York, NY 10020-1080							
	,	,					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Bible, John S.V.	if individual)				
Business or Residence Addr	*		Code)		
11 Cambridge Street, Cam	bridge, MA 02	2142			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Ha, Soo Young					
Business or Residence Addr					
Athena Technology Ventu	res, 310 Univer	rsityAvenue, #202, Palo	Alto, CA 94301		
Check Box(es) that Apply:	□Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Loeb, Walter	,			•	
Business or Residence Addr P.O. Box 1155, New York,	•		Code)		
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Schwartz, Jeffrey M.	ŕ				
Business or Residence Addr Bain Capital, 111 Hunting			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Simon, John	if individual)				
Business or Residence Addr General Catalyst Group, I					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Colonna, Jerry	if individual)				
Business or Residence Addr J.P. Morgan Partners, 122					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zip	Code)		

						B. INFO	RMATIO	N ABOU	T OFFER	ING					
1.	Has the	issuer sole	d, or does th	ne issuer in	tend to sell,	to non-acci	redited inve	estors in thi	s offering? .	•••••	***************************************		******	Yes	No ⊠
					A	nswer also	in Append	ix, Column	2, if filing	under ULO	E.				
2.	What is the minimum investment that will be accepted from any individual?									\$ N/A					
3.	3. Does the offering permit joint ownership of a single unit?										Yes	No ⊠			
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
		ist name fii	rst, if indivi	dual)											
N/A															
Busin	ess or Re	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name	of Asso	ciated Bro	ker or Deale	er											
States	in Whic	h Person I	isted Has S	Solicited or	Intends to S	Solicit Purc'	hasers								
											_) A11 C+-+			
(Спеск	'All States'	or check ii	ndividual S	tates)			,,		***************************************		All States			
i	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N	lame (La	ist name fi	rst, if indivi	idual)		•									
Busin	ess or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						· · · · · · · · · · · · · · · · · · ·		
Name	of Asso	ciated Bro	ker or Deal	er											
States	in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers						 		
(Chec	k "All S	tates" or cl	neck individ	iual States)] All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
	·		rst, if indivi		[]	1			[<u> </u>			·	
Busin	ess or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)							 	
Name	of Asso	ciated Bro	ker or Deal	er				_							
States	in Whic	h Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Chec	k "All S	tates" or cl	neck individ	iual States)	•••••		•••••					All States			
	(AL) (IL) (MT)	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]		

[TX] [UT] [VT] [VA] [WA] [WV] [WI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 20,000,000	\$ 19,800,000
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$
	Other (Specify)		\$
	Total		\$ 19,800,000
	Answer also in Appendix, Column 3, if filing under ULOE.		1 , ,
2.			
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	16	\$ 19,800,000
	Non-accredited Investors.		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		•
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ 190,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	\$ 190,000

	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	
4.	b. Enter the difference between the aggregate off expenses furnished in response to Part C - Questic issuer."	ering price given in response to Part C - Question 1 and tot on 4.a. This difference is the "adjusted gross proceeds to the	al ne	\$ 19,810,000
_				\$ 19,810,000
5.	the purposes shown. If the amount for any purpose	roceeds to the issuer used or proposed to be used for each of see is not known, furnish an estimate and check the box to the distributed must equal the adjusted gross proceeds to the issuer set	he	
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		🗆 \$	\$
			- · · · · · · · · · · · · · · · · · · ·	□ \$
		hinery and equipment		□ \$
	Construction or leasing of plant buildings and fac		 □ \$	
	Acquisition of other businesses (including the val offering that may be used in exchange for the assepursuant to a merger)	s	□ \$	
	Repayment of indebtedness		\$	□ \$
	Working capital		\$	⊠ \$ 19,810,000
	Other (specify):		<u> </u>	□ \$
	Column Totals		\$	⊠ \$ 19,810,000
	Total Payments Listed (column totals added)	🛮 🗆 \$ 19,8	10,000	
		D. FEDERAL SIGNATURE		,
an u		ne undersigned duly authorized person. If this notice is file rities and Exchange Commission, upon written request of i Rule 502.		
lss	uer (Print or Type)	Signature 0	Date	
Pr	ofitLogic, İnc.	January 2002		
	me of Signer (Print or Type) ichael Gonnerman	Title of Signer (Print or Type) Chief Financial Officer and Secretary		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION